



# CITY OF PITTSBURGH

## Department of Law

William Peduto, Mayor

Celia B. Liss, Open Records Officer

May 29, 2019

Jon Moss  
Dept MR 72099  
411A Highland Avenue  
Somerville, MA 02144-2516

**RE: RTK No. 49-02-2019**

Dear Mr. Moss:

On April 22, 2019, the City of Pittsburgh Open Records Office received your written request for records pursuant to the Pennsylvania Right-to-Know Law (RTKL), 65 P.S. §67.101 *et seq.* Your specific request is as follows:

*"Any and all statement of financial interest forms for Bruce Kraus."*

Upon investigation, the City's Open Records Office was able to locate the records enclosed herein. We have redacted personal identification information such as home address and telephone number. 65 P.S. §67.708(b)(6)(i)(A). No other responsive records exist. To the extent anything requested does not exist, the RTKL instructs that the City is not required to create records which do not currently exist. See 65 P.S. §67.705. Additionally, nothing in the RTKL shall be construed to modify, rescind or supersede any of the City's record retention policies. See 65 P.S. §67.507.

If you feel that any aspect of this response to your request is in error, you may take an appeal by writing to Erik Arneson, Executive Director, Office of Open Records, Commonwealth Keystone Building, 400 North Street, 4<sup>th</sup> Floor, Harrisburg, PA 17120. If you wish to take an appeal, you must do so within fifteen (15) business days of the date of this letter. See 65 P.S. §67.1101.

Sincerely,

Celia B. Liss  
Open Records Officer

CBL/emh

STATEMENT OF FINANCIAL INTERESTS  
PLEASE PRINT NEATLY

01 LAST NAME FIRST NAME MI SUFFIX  
KRAUS BRUCE A

02 /

NOTE IF YOU ARE INCLUDING ATTACHMENTS, DO NOT INCLUDE ANYTHING THAT BEARS YOUR SOCIAL SECURITY NUMBER OR FINANCIAL ACCOUNT NUMBERS.

03 STATUS Check applicable block or blocks more than one block may be marked. (See instructions on page 2)  
A ☒ Candidate (including write-in) C ☒ Public Official (Current) D ☐ Public Employee (Current) E ☐ Check this block if you are filing as a solicitor  
B ☐ Nominee C ☐ Public Official (Former) D ☐ Public Employee (Former) Check this block if you are amending an original filing

04 PUBLIC POSITION OR PUBLIC OFFICE (administrator, member, Commissioner, job title, etc.) ☒ seeking ☒ hold ☐ hold  
A COUNCILMAN ☐ seeking ☐ hold ☐ hold  
B

05 GOVERNMENTAL ENTITY in which you are/were an Official, Employee, Candidate or Nominee (e.g., dept., agency, authority, borough, board, commission, county, school district, twp., etc.)  
A CITY OF PITTSBURGH  
B

06 OCCUPATION OR PROFESSION (This may be the same as block 4) 07 YEAR Indicate calendar year for which form is being filed. SEE INSTRUCTIONS.  
CITY COUNCILMAN 2014

08 REAL ESTATE INTERESTS (See instructions on page 2) If NONE, check this box. ☒

09 CREDITORS (See instructions on page 2). Creditor (Name and Address) If NONE, check this box. ☐  
Name ATT UNIVERSAL CARD Address PO BOX 6500  
SIXA FALLS SD 57117 Interest Rate 19.0%  
(OFFICIAL USE ONLY)

10 DIRECT OR INDIRECT SOURCES OF INCOME including (but not limited to) all employment. (See instructions on pg. 2) ONLY IF NONE, check this block. ☐  
Name City of Pittsburgh Address 414 GRANT STREET  
15219

11 GIFTS (See instructions on page 2) If NONE, check this box. ☒  
Source of Gift Value of Gift  
Address of Source of Gift Circumstances (including description) of Gift

12 TRANSPORTATION, LODGING, HOSPITALITY (See instructions on page 2) If NONE, check this box. ☒  
Source (Name and Address) Value

13 OFFICE, DIRECTORSHIP OR EMPLOYMENT IN ANY BUSINESS (See instructions on page 2) If NONE, check this box. ☒  
Business Entity (Name and Address) Position Held  
Name Address

14 FINANCIAL INTEREST IN ANY LEGAL ENTITY IN BUSINESS FOR PROFIT (See instructions on page 2) If NONE, check this box. ☒  
Name and Address of Business Interest Held

15 BUSINESS INTERESTS TRANSFERRED TO IMMEDIATE FAMILY MEMBER (See instructions on page 2) If NONE, check this box. ☒  
Business (Name and Address) Interest Held Relationship Date Transferred  
Transferee (Name and Address)

The undersigned hereby affirms that the foregoing information is true and correct to the best of said person's knowledge, information and belief; said affirmation being made subject to the penalties prescribed by 18 Pa.C.S. §4904 (perjury/falsification to authorities) and the Public Official and Employee Ethics Act, 65 Pa.C.S. §1109(b)

Signature [Signature] Enter Current Date 3-9-2015

THIS FORM IS CONSIDERED DEFICIENT IF ANY BLOCK ABOVE IS NOT COMPLETED. MAKE A COPY FOR YOUR RECORDS.



**OFFICE OF THE CITY CLERK  
City of Pittsburgh**

510 City-County Building - Pittsburgh, Pennsylvania 15219-2457  
FAX NO: (412) 255-2821

Mary Beth Doheny  
City Clerk  
(412) 255-2138

Kimberly D. Clark  
Deputy City Clerk  
(412) 255-2132

**STATEMENT OF FINANCIAL INTEREST FORM**  
**PENNSYLVANIA STATE ETHICS COMMISSION**

Date: 3/16/15

Name on Form: KRAUS, Bruce

Attachments: YES        NO X

Number of Pages: 1

Delivered By (please print): JACOB LEDFERN

Received By: Ashtley Robinson

RECEIVED  
2015 MAR 10 A 9 35  
CITY CLERKS OFFICE

STATEMENT OF FINANCIAL INTERESTS  
PLEASE PRINT NEATLY

01 LAST NAME FIRST NAME MI SUFFIX  
K R A U S B R U C E A

NOTE IF YOU ARE INCLUDING ATTACHMENTS, DO NOT INCLUDE ANYTHING THAT BEARS YOUR SOCIAL SECURITY NUMBER OR FINANCIAL ACCOUNT NUMBERS

03 STATUS Check applicable block or blocks more than one block may be marked (See instructions on page 2)  
A ☒ Candidate (including write-in) C ☒ Public Official (Current) D ☐ Public Employee (Current) E ☐ Check this block if you are filing as a solicitor  
B ☐ Nominee C ☐ Public Official (Former) D ☐ Public Employee (Former) ☐ Check this block if you are amending an original filing

04 PUBLIC POSITION OR PUBLIC OFFICE (administrator, member, Commissioner, job title, etc.) ☒ seeking ☒ hold ☐ held  
A C O U N C I L M A N  
B

05 GOVERNMENTAL ENTITY in which you are/were an Official, Employee, Candidate or Nominee (e.g., dept, agency, authority, borough, board, commission, county school district, twp, etc.)  
A C I T Y O F P I T T S B U R G H  
B

06 OCCUPATION OR PROFESSION (This may be the same as block 4) 07 YEAR Indicate calendar year for which form is being filed SEE INSTRUCTIONS.  
C I T Y C O U N C I L M A N 2 0 1 4

06 REAL ESTATE INTERESTS (See instructions on page 2) If NONE, check this box. ☒

09 CREDITORS (See instructions on page 2) Creditor (Name and Address) If NONE, check this box. ☐  
Name A T T U N I V E R S A L C A R D Address P O B O X 6 5 0 0  
S I O O X F A L L S S D 5 7 1 1 7 Interest Rate 1 9 0 %

10 DIRECT OR INDIRECT SOURCES OF INCOME including (but not limited to) all employment. (See instructions on pg. 2) ONLY IF NONE, check this block. ☐  
Name C I T Y O F P I T T S B U R G H Address 4 1 4 G R A N T S T R E E T  
1 5 2 1 9 (OFFICIAL USE ONLY)

11 GIFTS (See instructions on page 2) If NONE, check this box. ☒  
Source of Gift V E D P I T T S B U R G H Value of Gift  
Address of Source of Gift C I T Y C L E R K S O F F I C E  
C I T Y C L E R K S O F F I C E Circumstances (including description) of Gift

12 TRANSPORTATION, LODGING, HOSPITALITY (See instructions on page 2) If NONE, check this box. ☒  
Source (Name and Address) C I T Y C L E R K S O F F I C E Value

13 OFFICE, DIRECTORSHIP, OR EMPLOYMENT IN ANY BUSINESS (See instructions on page 2) If NONE, check this box. ☐  
Business Entity (Name and Address) Position Held

14 FINANCIAL INTEREST IN ANY LEGAL ENTITY IN BUSINESS FOR PROFIT (See instructions on page 2) If NONE, check this box. ☒  
Name and Address of Business Interest Held

15 BUSINESS INTERESTS TRANSFERRED TO IMMEDIATE FAMILY MEMBER (See instructions on page 2) If NONE, check this box. ☒  
Business (Name and Address) Interest Held  
Transferee (Name and Address) Relationship Date Transferred

The undersigned hereby certifies that the foregoing information is true and correct to the best of said person's knowledge, information and belief; said affirmation being made subject to the penalties prescribed by 18 Pa C S. 1404 (unsworn falsification to authorities) and the Public Official and Employee Ethics Act, 65 Pa C S. §1109(b)

Signature *[Signature]* Enter Current Date 3-9-2015

THIS FORM IS CONSIDERED DEFICIENT IF ANY BLOCK ABOVE IS NOT COMPLETED. MAKE A COPY FOR YOUR RECORDS.



**OFFICE OF THE CITY CLERK**

**City of Pittsburgh**

510 City-County Building - Pittsburgh, Pennsylvania 15219-2457  
FAX NO: (412) 255-2821

Linda M. Johnson-Wasler  
City Clerk  
(412) 255-2138

Mary Beth Doheny  
Deputy City Clerk  
(412) 255-2132

**STATEMENT OF FINANCIAL INTEREST FORM**  
**PENNSYLVANIA STATE ETHICS COMMISSION**

Date: 28 April 2015

Name of person on form: KRAUS, BRUCE

Attachments:        YES   X   NO

Number of Pages:   1  

Delivered By (please print): KEVIN KERR

Received by: Ashley Robinson

STATEMENT OF FINANCIAL INTERESTS  
PLEASE PRINT NEATLY

01	LAST NAME	FIRST NAME	MI	SUFFIX
	KRAUS	BRUCE	A	

NOTE: IF YOU ARE INCLUDING ATTACHMENTS, DO NOT INCLUDE ANYTHING THAT BEARS YOUR SOCIAL SECURITY NUMBER OR FINANCIAL ACCOUNT NUMBERS

03 STATUS Check applicable block or blocks, more than one block may be marked (See instructions on page 2)

A <input type="checkbox"/> Candidate (including write-in)	C <input checked="" type="checkbox"/> Public Official (Current)	D <input type="checkbox"/> Public Employee (Current)	E <input type="checkbox"/> Check this block if you are filing as a solicitor	<input type="checkbox"/> Check this block if you are amending an original filing
B <input type="checkbox"/> Nominee	C <input type="checkbox"/> Public Official (Former)	D <input type="checkbox"/> Public Employee (Former)		

04 PUBLIC POSITION OR PUBLIC OFFICE (administrator, member, Commissioner, job title, etc.) ☐ seeking ☒ hold ☐ held

A COUNCILPERSON

☐ seeking ☐ hold ☐ held

B

05 GOVERNMENTAL ENTITY in which you are/were an Official, Employee, Candidate or Nominee (e.g., dept, agency, authority, borough, board, commission, county, school district, twp, etc.)

A CITY OF PITTSBURGH

B

06 OCCUPATION OR PROFESSION (This may be the same as block 4)

CITY COUNCILPERSON

07 YEAR Indicate calendar year for which form is being filed SEE INSTRUCTIONS.

2015

08 REAL ESTATE INTERESTS (See instructions on page 2) If NONE, check this box. ☒

09 CREDITORS (See instructions on page 2). Creditor (Name and Address) If NONE, check this box. ☐

Name: PNC Address: 1 PNC PLAZA 245 FIFTH AVE, PITTSBURGH PA 15222

Interest Rate: 0%

10 DIRECT OR INDIRECT SOURCES OF INCOME including (but not limited to) all employment. (See instructions on pg. 2) ONLY IF NONE, check this block. ☒

Name: City of Pittsburgh Address: 414 GRANT ST 15219

CLERKS OFFICE

APR - 6

APR 11: 56

RECEIVED

11 GIFTS (See instructions on page 2) If NONE, check this box. ☒

Source of Gift

Address of Source of Gift

Circumstances (including description of Gift)

12 TRANSPORTATION, LODGING, HOSPITALITY (See instructions on page 2) If NONE, check this box. ☒

Source (Name and Address)

Value

13 OFFICE, DIRECTORSHIP, OR EMPLOYMENT IN ANY BUSINESS (See instructions on page 2) If NONE, check this box. ☐

Business Entity (Name and Address)

Name Address Position Held

14 FINANCIAL INTEREST IN ANY LEGAL ENTITY IN BUSINESS FOR PROFIT (See instructions on page 2) If NONE, check this box. ☒

Name and Address of Business

Interest Held

15 BUSINESS INTERESTS TRANSFERRED TO IMMEDIATE FAMILY MEMBER (See instructions on page 2) If NONE, check this box. ☒

Business (Name and Address)

Transferee (Name and Address)

Interest Held Relationship Date Transferred

The undersigned hereby affirms that the foregoing information is true and correct to the best of said person's knowledge, information and belief; said affirmation being made subject to the penalties prescribed by 18 Pa C.S. 4904 (perjury/falsification to authorities) and the Public Official and Employee Ethics Act, 65 Pa C.S. 51109(b).

Signature

Enter Current Date

4-5-2016

THIS FORM IS CONSIDERED DEFICIENT IF ANY BLOCK ABOVE IS NOT COMPLETED. MAKE A COPY FOR YOUR RECORDS.



**OFFICE OF THE CITY CLERK  
City of Pittsburgh**

510 City-County Building - Pittsburgh, Pennsylvania 15219-2457  
FAX NO: (412) 255-2821

Linda M. Johnson-Wasler  
City Clerk  
(412) 255-2138

Mary Beth Doheny  
Deputy City Clerk  
(412) 255-2132

**STATEMENT OF FINANCIAL INTEREST FORM**  
**PENNSYLVANIA STATE ETHICS COMMISSION**

Date: 4/6/16

Name of person on form: KRAUS, Bruce

Attachments:      YES   X   NO

Number of Pages: 1

Delivered By (please print): [Signature]

Received by: [Signature]

CITY CLERKS OFFICE

2016 APR - 6 A 11: 56

RECEIVED



STATEMENT OF FINANCIAL INTERESTS  
PLEASE PRINT NEATLY

01 LAST NAME FIRST NAME MI SUFFIX  
KRAUS BRUCE A

02 ADDRESS office (business or governmental) or home City State Zip Code Area Code Phone  
414 GRANT ST, STE 557 PITTSBURGH PA 15214 (412) 255-2130

NOTE IF YOU ARE INCLUDING ATTACHMENTS, DO NOT INCLUDE ANYTHING THAT BEARS YOUR SOCIAL SECURITY NUMBER OR FINANCIAL ACCOUNT NUMBERS.

03 STATUS Check applicable block or blocks, more than one block may be marked (See instructions on page 2)  
A ☐ Candidate (including write-in) C ☒ Public Official (Current) D ☐ Public Employee (Current) E ☐ Check this block if you are filing as a solicitor  
B ☐ Nominee C ☐ Public Official (Former) D ☐ Public Employee (Former) ☐ Check this block if you are amending an original filing

04 PUBLIC POSITION OR PUBLIC OFFICE (administrator, member, Commissioner, job title, etc.) ☐ seeking ☒ hold ☐ held  
A CITY COUNCIL MEMBER  
☐ seeking ☐ hold ☐ held

B

05 GOVERNMENTAL ENTITY in which you are/were an Official, Employee, Candidate or Nominee (e.g., dept. agency, authority, borough, board, commission, county, school district, twp, etc.)

A CITY OF PITTSBURGH

B

06 OCCUPATION OR PROFESSION (This may be the same as block 4) 07 YEAR SEE INSTRUCTIONS  
CITY COUNCIL MEMBER Information in Blocks 8-15 represents disclosure for the calendar year listed here 2017

08 REAL ESTATE INTERESTS (See instructions on page 2) If NONE, check this box. ☐

09 CREDITORS (See instructions on page 2) Creditor (Name and Address) If NONE, check this box. ☐  
Name: PNC BANK Address: 1 PNC BANK PLAZA Interest Rate: 0%  
#6,924.90 245 FIFTH AVE PGH PA 15222

10 DIRECT OR INDIRECT SOURCES OF INCOME including (but not limited to) all employment. (See instructions on pg 2) ONLY IF NONE, check this block. ☐ (OFFICIAL USE ONLY)  
Name: CITY OF PITTSBURGH Address: 414 GRANT ST  
PITTSBURGH PA 15219

11 GIFTS (See instructions on page 2) If NONE, check this box. ☒  
Source of Gift: Address of Source of Gift: Circumstances (including description) of Gift: Value of Gift:

12 TRANSPORTATION, LODGING, HOSPITALITY (See instructions on page 2) If NONE, check this box. ☒  
Source (Name and Address): Address: Value of Gift:

13 OFFICE, DIRECTORSHIP, OR EMPLOYMENT IN ANY BUSINESS (See instructions on page 2) If NONE, check this box. ☒  
Business Entity (Name and Address): Address: Position Held (e.g., officer, director, employee, etc.):

14 FINANCIAL INTEREST IN ANY LEGAL ENTITY IN BUSINESS FOR PROFIT (See instructions on page 2) If NONE, check this box. ☒  
Name and Address of Business: Interest Held (e.g., 5%, 10%, etc.):

15 BUSINESS INTERESTS TRANSFERRED TO IMMEDIATE FAMILY MEMBER (See instructions on page 2) If NONE, check this box. ☒  
Business (Name and Address): Transferred (Name and Address): Interest Held Relationship Date Transferred:

The undersigned hereby affirms that the foregoing information is true and correct to the best of said person's knowledge, information and belief; said affirmation being made subject to the penalties prescribed by 18 Pa C.S. §4904 (unsworn falsification to authorities) and the Public Official and Employee Ethics Act, 65 Pa C.S. §1109(b).

Signature: 

Enter Current Date

2-17-2017

THIS FORM IS CONSIDERED DEFICIENT IF ANY BLOCK ABOVE IS NOT COMPLETED. MAKE A COPY FOR YOUR RECORDS.



# DISCLOSURE OF INTERESTS

Kindly return completed form by January 15, 2017  
to City Controller Michael Lamb

Name:

BRUCE A. KRAUS

Date:

5.1.2017

Office/Position:

CITY COUNCIL DISTRICT 3- COUNCILMAN

In accordance with the provisions of the Home Rule Charter of the City of Pittsburgh, Article 8, General Provisions, Sub-Section 801, Disclosure of Interests:

A. State the names of all business or non-profit corporations, associations, partnerships, joint ventures, estates, proprietorships, trusts, business activities and organizations, other than religious organizations and religious corporations [please use additional paper if needed]:

1. With which you have any connection as an owner, officer, employee, consultant, contractor, creditor, shareholder, member, partner, joint venturer, trustee, beneficiary or participant.

- CARNEGIE LIBRARY BOARD

- CARNEGIE MUSEUMS BOARD

- BRASHEAR ASSOCIATION BOARD

- CHILDREN'S SICKLE CELL FOUNDATION BOARD (ADVISORY)

- IRETA BOARD (ADVISORY)

- OAKLAWN BUSINESS IMPROVEMENT BOARD (ADVISORY)

- CARNEGIE MELLON UNIVERSITY BOARD

- EQUIPMENT LEASING AUTHORITY PITTSBURGH BOARD

2. In which you have any financial property interest in any form, whether a legal interest or equitable interest or otherwise. Please state, as to each name, the nature of the connection or interest.

NONE

2017 MAY - 1 P 2:30  
CITY CLERKS OFFICE

ED

DISCLOSURE OF INTERESTS  
Page 2 of 2

2017 MAY -1 P 2:30

- B. Briefly describe all legal and equitable interest of any degree in real property held by you.

PRIVATE HOME: 157 S. 18<sup>TH</sup> ST

PITTSBURGH PA 15203

- C. State the remaining amounts of any funds and contributions related to your most recent nomination and elections, by whom and how the funds are held.

FRIENDS OF BRUCE KRAUS

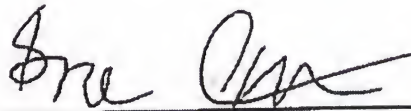
5-1-2017 - \$5000

- D. State the names of all your creditors and debts as to which you are co-signer, surety or guarantor in excess of \$1,000.00.

SEARS: \$3,000

PNC: \$6,000

Signature:



Title:

COUNCILMAN D3

Date:

5-1-2017

STATEMENT OF FINANCIAL INTERESTS  
PLEASE PRINT NEATLY

01 LAST NAME FIRST NAME MI SUFFIX  
KRAUS BEUCE A

02 ADDRESS office (business or governmental) or home City State Zip Code Area Code Phone  
557 CITY COUNTY BUILD 414 GRANT ST DCH PA 15219 412 255 2130

NOTE: IF YOU ARE INCLUDING ATTACHMENTS, DO NOT INCLUDE ANYTHING THAT BEARS YOUR SOCIAL SECURITY NUMBER OR FINANCIAL ACCOUNT NUMBERS

03 STATUS Check applicable block or blocks more than one block may be marked. (See instructions on page 2)  
A ☐ Candidate (including write-in) C ☒ Public Official (Current) D ☐ Public Employee (Current) E ☐ Check this block if you are filing as a solicitor  
B ☐ Nominee C ☐ Public Official (Former) D ☐ Public Employee (Former) Check this block if you are amending an original filing

04 PUBLIC POSITION OR PUBLIC OFFICE (administrator, member, Commissioner, job title, etc.) ☐ seeking ☒ hold ☐ held  
A CITY COUNCILMAN  
B EQUIPMENT LEASING AUTHORITY

05 GOVERNMENTAL ENTITY in which you are/were an Official, Employee, Candidate or Nominee (e.g., dept, agency, authority, borough, board, commission, county school district, twp, etc.)  
A CITY COUNCILMAN DISTRICT 3  
B EQUIPMENT LEASING AUTHORITY

06 OCCUPATION OR PROFESSION (This may be the same as block 4) 07 YEAR SEE INSTRUCTIONS.  
COUNCILMAN Information in Blocks 8 - 15 represents disclosure for the calendar year listed here. 2018

08 REAL ESTATE INTERESTS (See instructions on page 2) If NONE, check this box. ☒ REC'D CLERK'S OFFICE  
2019 MAR 11 AM 10:53

09 CREDITORS (See instructions on page 2) Creditor (Name and Address) If NONE, check this box. ☐  
Name PNC Address PNC PLAZA  
245 5th AVE 15222 Interest Rate 0%

10 DIRECT OR INDIRECT SOURCES OF INCOME including (but not limited to) all employment (See instructions on pg. 2) ONLY IF NONE, check this block. ☐  
Name CITY OF PITTSBURGH Address 414 GRANT STREET  
15219 (OFFICIAL USE ONLY)

11 GIFTS (See instructions on page 2) If NONE, check this box. ☒  
Source of Gift Value of Gift  
Address of Source of Gift Circumstances (including description) of Gift

12 TRANSPORTATION, LODGING, HOSPITALITY (See instructions on page 2) If NONE, check this box. ☒  
Source (Name and Address) Value  
Circumstances (including description) of Gift

13 OFFICE, DIRECTORSHIP, OR EMPLOYMENT IN ANY BUSINESS (See instructions on page 2) If NONE, check this box. ☐  
Business Entity (Name and Address) Position Held (i.e., officer, director, employee, etc.)  
Name SEE ATTACHMENT Address:

14 FINANCIAL INTEREST IN ANY LEGAL ENTITY IN BUSINESS FOR PROFIT (See instructions on page 2) If NONE, check this box. ☒  
Name and Address of Business Interest Held (i.e., 5%, 10%, etc.)

15 BUSINESS INTERESTS TRANSFERRED TO IMMEDIATE FAMILY MEMBER (See instructions on page 2) If NONE, check this box. ☒  
Business (Name and Address) Interest Held Relationship Date Transferred  
Transferee (Name and Address)

The undersigned hereby affirms that the foregoing information is true and correct to the best of said person's knowledge, information and belief; said affirmation being made subject to the penalties prescribed by 48 Pa.C.S. §4904 (unsworn falsification to authorities) and the Public Official and Employee Ethics Act, 65 Pa.C.S. §1109(b)

Signature Blue Ch... Enter Current Date

THIS FORM IS CONSIDERED DEFICIENT IF ANY BLOCK ABOVE IS NOT COMPLETED. MAKE A COPY FOR YOUR RECORDS.

Bever A. Klaus  
"STATEMENT OF FINANCIAL INTEREST"  
"ATTACHMENT"

BOARD APPOINTMENTS  
2019

- ① MUNICIPAL PENSION FUND
- ② CARNEGIE MUSEUM BOARD
- ③ CARNEGIE LIBRARY BOARD
- ④ IRETA BOARD (ADVISORY)
- ⑤ OBID
- ⑥ PITTSBURGH CULTURAL TRUST
- ⑦ CMU BOARD OF TRUSTEES
- ⑧ SHEPHERD WELLNESS

REC'D CLERK'S OFFICE  
2019 MAR 11 AM 10:53



**OFFICE OF THE CITY CLERK**  
**City of Pittsburgh**

510 City-County Building – Pittsburgh, Pennsylvania 15219-2457  
FAX NO: (412) 255-2821

Brenda F. Pree, CMC  
City Clerk  
(412) 255-2138

Kimberly Clark-Baskin  
Deputy City Clerk  
(412) 255-2132

**STATEMENT OF FINANCIAL INTEREST FORM RECEIPT**  
**PENNSYLVANIA STATE ETHICS COMMISSION**

Date: 3/11/19

Name on form: KRAUS, BRUCE A.

Attachments: X Yes        No

Number of Pages: 2

Delivered by (please print): Bruce A. Kraus

Received by: Ashley

REC'D CLERK'S OFFICE  
2019 FEB 06 PM 4:48  
PENNSYLVANIA STATE ETHICS COMMISSION  
TOLL FREE 1-800-932-0936

**STATEMENT OF FINANCIAL INTERESTS**  
PLEASE PRINT NEATLY

01 LAST NAME FIRST NAME MI SUFFIX  
KRAUS BRUCE A

02 ADDRESS office (business or governmental) or home City State Zip Code Area Code Phone  
557 City-County Bldg 414 Grant St Pittsburgh PA 15219 (412) 255 2130

NOTE: IF YOU ARE INCLUDING ATTACHMENTS, DO NOT INCLUDE ANYTHING THAT BEARS YOUR SOCIAL SECURITY NUMBER OR FINANCIAL ACCOUNT NUMBERS

03 STATUS Check applicable block or blocks, more than one block may be marked. (See instructions on page 2)

A ☐ Candidate (including write-in) C ☒ Public Official (Current) D ☐ Public Employee (Current) E ☐ Check this block if you are filing as a solicitor

B ☐ Nominee C ☐ Public Official (Former) D ☐ Public Employee (Former)

☐ Check this block if you are amending an original filing

04 PUBLIC POSITION OR PUBLIC OFFICE (administrator, member, Commissioner, job title, etc.) ☐ seeking ☒ hold ☐ held

A COUNCILMAN ☐ seeking ☐ hold ☐ held

B EQUIPMENT LEASING AUTHORITY

05 GOVERNMENTAL ENTITY in which you are/were an Official Employee, Candidate or Nominee (e.g. dept, agency, authority, borough, board, commission, county, school district, twp, etc.)

A PITTSBURGH CITY COUNCIL

B EQUIPMENT LEASING AUTHORITY

06 OCCUPATION OR PROFESSION (This may be the same as block 4) 07 YEAR SEE INSTRUCTIONS  
COUNCILMAN Information in Blocks 8 - 15 represents disclosure for the calendar year listed here 2018

08 REAL ESTATE INTERESTS (See instructions on page 2) If NONE, check this box. ☒

09 CREDITORS (See instructions on page 2) Creditor (Name and Address) If NONE, check this box. ☐ Interest Rate  
Name PNC Address 1 PNC PLAZA 0%  
245 Fifth Ave, Pittsburgh, PA 15222

10 DIRECT OR INDIRECT SOURCES OF INCOME including (but not limited to) all employment. (See instructions on pg. 2) ONLY IF NONE, check this block. ☐ (OFFICIAL USE ONLY)

Name City of Pittsburgh Address 414 GRANT ST  
15219

11 GIFTS (See instructions on page 2) If NONE, check this box. ☒

Source of Gift Value of Gift

Address of Source of Gift Circumstances (including description) of Gift

12 TRANSPORTATION, LODGING, HOSPITALITY (See instructions on page 2) If NONE, check this box. ☒ Value

Source (Name and Address)

13 OFFICE, DIRECTORSHIP, OR EMPLOYMENT IN ANY BUSINESS (See instructions on page 2) If NONE, check this box. ☐ Position Held (i.e. officer, director, employee, etc.)

Business Entity (Name and Address) Address 580 FORBES AVE 15217 BOARD

Name CARNEGIE LIBRARY

14 FINANCIAL INTEREST IN ANY LEGAL ENTITY IN BUSINESS FOR PROFIT (See instructions on page 2) If NONE, check this box. ☒ Interest Held (i.e. 5%, 10%, etc.)

Name and Address of Business

15 BUSINESS INTERESTS TRANSFERRED TO IMMEDIATE FAMILY MEMBER (See instructions on page 2) If NONE, check this box. ☒

Business (Name and Address) Interest Held Relationship Date Transferred

Transferee (Name and Address)

The undersigned hereby affirms that the foregoing information is true and correct to the best of said person's knowledge, information and belief; said affirmation being made subject to the penalties prescribed by 18 Pa.C.S. §4904 (a) (newsworthy information to authorities) and the Public Official and Employee Ethics Act, 65 Pa.C.S. §1109(b)

Signature [Signature] Enter Current Date 2/6/2019

THIS FORM IS CONSIDERED DEFICIENT IF ANY BLOCK ABOVE IS NOT COMPLETED. MAKE A COPY FOR YOUR RECORDS.



**BRUCE A. KRAUS**  
Councilman, City of Pittsburgh - District 3  
City Council President



REC'D CLERK'S OFFICE  
2019 FEB 6 PM 4:46

Statement of Financial Interests

February, 2018

State the names of all business or non-profit corporations, associations, partnerships, joint ventures, estates, proprietorships, trusts, business activities and organizations, other than religious organizations and religious corporations:

Municipal Pension Fund  
Carnegie Museum Board  
Carnegie Library Board  
IRETA Board Member  
Oakland Business Improvement District: Board Member  
Pittsburgh Cultural Trust Board  
CMU Board of Trustees  
Shepherd Wellness

# STATEMENT OF FINANCIAL INTERESTS

PLEASE PRINT NEATLY

01 LAST NAME FIRST NAME MI SUFFIX  
K R A V U S B R U C E A

02 ADDRESS office (business or governmental) or home City State Zip Code Area Code Phone  
557 City-County Building 414 GRANT ST Pittsburgh PA 15219 (412) 255 2130

NOTE: IF YOU ARE INCLUDING ATTACHMENTS, DO NOT INCLUDE ANYTHING THAT BEARS YOUR SOCIAL SECURITY NUMBER OR FINANCIAL ACCOUNT NUMBERS.

03 STATUS Check applicable block or blocks, more than one block may be marked. (See instructions on page 2)

A ☒ Candidate (including write-in) C ☒ Public Official (Current) D ☐ Public Employee (Current) E ☐ Check this block if you are filing as a solicitor

B ☐ Nominee C ☐ Public Official (Former) D ☐ Public Employee (Former)

☐ Check this block if you are amending an original filing

04 PUBLIC POSITION OR PUBLIC OFFICE (administrator, member, Commissioner, job title, etc.) ☒ seeking ☒ hold ☐ held

A C O U N C I L M A N

☐ seeking ☐ hold ☐ held

B E Q U I P M E N T L E A S I N G A U T H O R I T Y

05 GOVERNMENTAL ENTITY in which you are/were an Official, Employee, Candidate or Nominee (e.g., dept, agency, authority, borough, board, commission, county, school district, twp, etc.)

A P I T T S B U R G H C I T Y C O U N C I L

B E Q U I P M E N T L E A S I N G A U T H O R I T Y

06 OCCUPATION OR PROFESSION (This may be the same as block 4) 07 YEAR SEE INSTRUCTIONS.

COUNCILMAN Information in Blocks 8 - 15 represents disclosure for the calendar year listed here 2 0 1 8

08 REAL ESTATE INTERESTS (See instructions on page 2) If NONE, check this box. ☒

09 CREDITORS (See instructions on page 2). Creditor (Name and Address) If NONE, check this box. ☐

Name PNC Address 1 PNC PLAZA 245 FIFTH AVE, PITTSBURGH PA 15222 Interest Rate 0%.

10 DIRECT OR INDIRECT SOURCES OF INCOME including (but not limited to) all employment (See instructions on pg 2) ONLY IF NONE, check this block. ☐ (OFFICIAL USE ONLY)

Name CITY OF PITTSBURGH Address 414 GRANT ST 15219

11 GIFTS (See instructions on page 2) If NONE, check this box. ☒

Source of Gift Value of Gift

Address of Source of Gift Circumstances (including description) of Gift

12 TRANSPORTATION, LODGING, HOSPITALITY (See instructions on page 2) If NONE, check this box. ☒

Source (Name and Address) Value

13 OFFICE, DIRECTORSHIP, OR EMPLOYMENT IN ANY BUSINESS (See instructions on page 2) If NONE, check this box. ☐

Business Entity (Name and Address) Position Held (i.e. officer, director, employee, etc.)

Name CARNEGIE LIBRARY Address 580 FORBES AVE 15217 BOARD

14 FINANCIAL INTEREST IN ANY LEGAL ENTITY IN BUSINESS FOR PROFIT (See instructions on page 2) If NONE, check this box. ☒

Name and Address of Business Interest Held (i.e. 5%, 10%, etc.)

15 BUSINESS INTERESTS TRANSFERRED TO IMMEDIATE FAMILY MEMBER (See instructions on page 2) If NONE, check this box. ☒

Business (Name and Address) Interest Held Relationship Date Transferred

Transferee (Name and Address)

The undersigned hereby affirms that the foregoing information is true and correct to the best of said person's knowledge, information and belief; said affirmation being made subject to the penalties prescribed by 18 Pa.C.S. § 4904 (unsworn falsification to authorities) and the Public Official and Employee Ethics Act, 65 Pa.C.S. § 1109(b)

Signature Enter Current Date 2/6/2019

THIS FORM IS CONSIDERED DEFICIENT IF ANY BLOCK ABOVE IS NOT COMPLETED. MAKE A COPY FOR YOUR RECORDS.

REC'D CLERK'S OFFICE  
2019 FEB 6 PM 4:46



**BRUCE A. KRAUS**  
Councilman, City of Pittsburgh - District 3  
City Council President



REC'D CLERK'S OFFICE  
2019 FEB 6 PM 4:46

Statement of Financial Interests

February, 2018

State the names of all business or non-profit corporations, associations, partnerships, joint ventures, estates, proprietorships, trusts, business activities and organizations, other than religious organizations and religious corporations:

Municipal Pension Fund  
Carnegie Museum Board  
Carnegie Library Board  
IRETA Board Member  
Oakland Business Improvement District: Board Member  
Pittsburgh Cultural Trust Board  
CMU Board of Trustees  
Shepherd Wellness



STATEMENT OF FINANCIAL INTERESTS  
PLEASE PRINT NEATLY

01 LAST NAME FIRST NAME MI SUFFIX  
KRAUS BRUCE A

02 ADDRESS office (business or governmental) or home City Pittsburgh State PA Zip Code 15219 Area Code 412 Phone 253-2130  
414 GRANT ST - STE 557

NOTE: IF YOU ARE INCLUDING ATTACHMENTS, DO NOT INCLUDE ANYTHING THAT BEARS YOUR SOCIAL SECURITY NUMBER OR FINANCIAL ACCOUNT NUMBERS.

03 STATUS Check applicable block or blocks, more than one block may be marked. (See instructions on page 2)  
A ☐ Candidate (including write-in) C ☒ Public Official (Current) D ☐ Public Employee (Current) E ☐ Check this block if you are filing as a solicitor ☐ Check this block if you are amending an original filing  
B ☐ Nominee C ☐ Public Official (Former) D ☐ Public Employee (Former)

04 PUBLIC POSITION OR PUBLIC OFFICE (administrator, member, Commissioner, job title, etc.) ☐ seeking ☒ hold ☐ held  
A CITY COUNCIL MEMBER  
☐ seeking ☐ hold ☐ held

05 GOVERNMENTAL ENTITY in which you are/were an Official, Employee, Candidate or Nominee (e.g., dept, agency, authority, borough, board, commission, county, school district, twp, etc.)  
A CITY OF PITTSBURGH  
B

06 OCCUPATION OR PROFESSION (This may be the same as block 4) CITY COUNCIL MEMBER  
07 YEAR SEE INSTRUCTIONS.  
Information in Blocks 8-15 represents disclosure for the calendar year listed here: 2018

08 REAL ESTATE INTERESTS (See instructions on page 2) If NONE, check this box. ☐

09 CREDITORS (See instructions on page 2). Creditor (Name and Address) If NONE, check this box. ☒  
Name Address Interest Rate

10 DIRECT OR INDIRECT SOURCES OF INCOME including (but not limited to) all employment. (See instructions on pg. 2) ONLY IF NONE, check this box. ☒ (OFFICIAL USE ONLY)  
Name Address

11 GIFTS (See instructions on page 2) If NONE, check this box. ☒  
Source of Gift Value of Gift  
Address of Source of Gift Circumstances (including description) of Gift

12 TRANSPORTATION, LODGING, HOSPITALITY (See instructions on page 2) If NONE, check this box. ☒  
Source (Name and Address) Value

13 OFFICE, DIRECTORSHIP, OR EMPLOYMENT IN ANY BUSINESS (See instructions on page 2) If NONE, check this box. ☒  
Business Entity (Name and Address) Position Held (i.e., officer, director, employee, etc.)  
Name Address

14 FINANCIAL INTEREST IN ANY LEGAL ENTITY IN BUSINESS FOR PROFIT (See instructions on page 2) If NONE, check this box. ☒  
Name and Address of Business Interest Held (i.e., 5%, 10%, etc.)

15 BUSINESS INTERESTS TRANSFERRED TO IMMEDIATE FAMILY MEMBER (See instructions on page 2) If NONE, check this box. ☒  
Business (Name and Address) Interest Held Relationship Date Transferred  
Transferee (Name and Address)

The undersigned hereby affirms that the foregoing information is true and correct to the best of said person's knowledge, information and belief; said affirmation being made subject to the penalties prescribed by 18 Pa.C.S. §4904 (Unlawful falsification to authorities) and the Public Official and Employee Ethics Act, 65 Pa.C.S. §1109(b).

Signature Date 4/3/18

THIS FORM IS CONSIDERED DEFICIENT IF ANY BLOCK ABOVE IS NOT COMPLETED. MAKE A COPY FOR YOUR RECORDS.



# OFFICE OF THE CITY CLERK

## City of Pittsburgh

510 City-County Building – Pittsburgh, Pennsylvania 15219-2457

FAX NO: (412) 255-2821

Brenda F. Price, CMC

City Clerk  
(412) 255-2138

Kimberly Clark-Baskin

Deputy City Clerk  
(412) 255-2132

### STATEMENT OF FINANCIAL INTEREST FORM RECEIPT PENNSYLVANIA STATE ETHICS COMMISSION

Date: 4/3/18

Name on form: KRAUS, BRUCE A.

Attachments:        Yes   X   No

Number of Pages:   1  

Delivered by (please print): Neil Mangano

Received by: Ashley R.